# Ohio Campaign Finance Report

05 NOV -2 PM 1: 15

425 Derrer Rd City Auditor State Zip Code	strict
Full Name of Candidate  Hugh J. Dorrian  Street Address  425 Derrer Rd  City Auditor  City  State  City Code	strict
Hugh J. Dorrian  Street Address  425 Derrer Rd  City Auditor  State Zip Code	strict
Street Address  425 Derrer Rd  City Auditor  State Zip Code	strict
425 Derrer Rd City Auditor City State Zip Code	strict
City State Zip Code	
Columbus O H 43204	
Type of Report Pre-Primary Post-Primary X Pre-General Post-General	Annual Year
(place X to the left of report July August September	Semiannual
type) Monthly Monthly Monthly Termination	
Amended Report? Report Electronically filed? M D	Y
☐ Yes ☑ No ☐ ☐ Yes ☑ No ☐ Date of Election ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	$8 \mid_0 \mid_5$

1. Amount brought forward from last report	\$ 29,558.33
2. Total monetary contributions (From Form No. 31-A)	29,558.33 \$ 6,220.00
3. Total other income (From Porm No. 31-A-2)	\$
4. Total funds available (sum of lines 1, 2, 3)	\$ 35,778.33
5. Total monetary expenditures (From Form No. 31-B)	\$ 6,169.56
6. Balance on hand (line 4 minus line 5)	\$ 29,608.77
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$
9. Outstanding loans owed by committee (From Form No. 31-C)	\$
10. Outstanding debts owed by committee (From Form No. 31-N)	\$
11. Outstanding loans owed to committee (From Form No. 31-K)	\$
12. Value of independent expenditures made (From Form No. 31-U)	\$
The Properties of the Pro	\$

SIFÍČAȚION. WHOEVER
11/02/05
Date
Total
pages 5

### **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full  Citizens for Dorrigon Committee									
Citizens for Dorrian Committee				In a mintage	dan Masa	1 :CDA			
Full Name of Contributor K. A. Manoranjan				Registra	non Num	ber, if PA	.C		
Street Address	Employe	r/Occupa	tion/Labor Organization*	<u> </u>			Form (Cash, C	heck etc.)	
		_					Check	neek, etc.)	
344 Cramer Creek Ct.		G Co	Zip Code	М	D	Y	Amount		
<sup>City</sup> Dublin	0	ate   H	43017	$\begin{vmatrix} \mathbf{M} \\ 1 \end{vmatrix} 0$	$\begin{vmatrix} 1 \\ 2 \end{vmatrix} 0$		Amount	1,000.00	
Full Name of Contributor						ber, if PA	C		
Ajith A. Balaratnarajah									
Street Address	Employe	г/Оссира	tion/Labor Organization*		'		Form (Cash, C	heck, etc.)	
7444 Murrayfield Dr.	Pre	mier	Accounting Solution	ons			Check		
City		ate	Zip Code	М	D	Y	Amount		
Worthington	lο	Н	43085	1 0	210	0   5		1,250.00	
Full Name of Contributor			10000			ber, if PA	C	1,200.00	
Murali Ramalingam				Ĭ		,			
Street Address	Employe	r/Occupa	tion/Labor Organization*	<u> </u>			Form (Cash, C	heck etc.)	
		-	Accounting Solution	313 C			Check		
7426 Mapleleaf Blvd.	+		Zip Code	M	D	Y	Amount		
•		H	43235	l .			Amount	1,250.00	
Columbus Full Name of Contributor	U	11	43233	1 0	2 0	0 5 ber, if PA	<u> </u>	1,230.00	
				Registra	uon Num	bei, ii FA	C		
J. Lorraine Buonauro	Ir	/	tion /I about Ourseningtion*			-	Form (Cash, C	haals ata )	
Street Address			tion/Labor Organization*					neck, etc.)	
1456 Thurell Rd.	N/.		To: 0 1	T 34	1 -	1 17	Check		
City	1 _	ate ⊔	Zip Code	M	D	Y	Amount	20.00	
Columbus	0	Н	43229	1 0	1 9			20.00	
Full Name of Contributor				Registra	tion Num	ber, if PA	C		
Smith & Hale							- 12 1 2		
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)		
37 W. Broad St.	+	orney					Check		
City	I _	ate	Zip Code	M	D	Y	Amount	2=2.00	
Columbus	0	H	43215			0 5		250.00	
Full Name of Contributor						ber, if PA	С		
Ohio AFSCME United Political				PC.	E 608	9			
Street Address	Employe	r/Occupa	tion/Labor Organization*			·	Form (Cash, C	heck, etc.)	
6805 Oak Creek Dr.							Check		
City	1	ate	Zip Code	M	D	Y	Amount		
Columbus	0	Н	43229	1 0	1 2	0 5		1,000.00	
Full Name of Contributor				Registra	tion Num	ber, if PA	С		
Warren Tyler									
Street Address	Employe	r/Occupa	tion/Labor Organization*				Form (Cash, C	heck, etc.)	
3409 River Seine St.	N/.	A					Check		
City	Sta	ate	Zip Code	M	D	Y	Amount		
Columbus	0	Н	43221	1 0	1   5	0 5		250.00	
Full Name of Contributor				Registra	tion Num	ber, if PA	С		
Build Pac of Central Ohio				LOH	[ 135				
Street Address	Employe	r/Occupa	tion/Labor Organization*				Form (Cash, C	heck, etc.)	
495 Executive Campus Dr.							Check		
City	Sta	ate	Zip Code	M	D	Y	Amount		
Westerville	0	Н	43082	1 0	$1 \mid 1$	0   5		500.00	

Page Total \$ 5,520.00

<sup>\*</sup> Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must appear. [R.C. 3517.10(B)(4)]

Page	2
rage	

#### **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full									
Citizens for Dorrian Committee									
Full Name of Contributor				Regist	tratio	on Num	ber, if P	AC	
Ray Pendell								<u> </u>	
Street Address		-	tion/Labor Organization*					Form (Cash, Ch	eck, etc.)
676 S Sylvan Ave	N/A							Check	
City	Stat		Zip Code	M		D	Y	Amount	F0.00
Columbus	О	Н	43204	1		1 2	0 5		50.00
Full Name of Contributor				Regist	tratic	n Num	ber, if P	AC	
A. James Siebert	le 1 /	-	с' <b>л. 1</b> . О . ' . d					Form (Cash, Ch	
Street Address	Employer/Occupation/Labor Organization*								eck, etc.)
1040 Bluesail Dr. DLZ								Check	
City	Stat		Zip Code	M		D	Y	Amount	150.00
Westerville	О	Н	43081			1 9	0 5		150.00
Full Name of Contributor	~=			Regist	tratic	n Num	ber, if PA	AC	
Columbus Franklin County AFL CIO P				<u> </u>					
Street Address	1 ' ' ' '							Form (Cash, Ch	eck, etc.)
1545 Alum Creek Dr.								Check	
City	Stat		Zip Code	M		D	Y	Amount	200.00
Columbus	0	Н	43209	1		2 1	0 5		200.00
Full Name of Contributor				Regist	tratic	on Num	ber, if PA	AC	
Sunil Aggarwal		_						In (0.1.6)	1
Street Address	Employer/Occupation/Labor Organization*							Form (Cash, Ch	eck, etc.)
7393 Cimmaron Sta	Com							Check	
City	Stat		Zip Code	M	ا ۲	D	Y	Amount	100.00
Columbus	0	Н	43235	_		2 2	0 5		100.00
Full Name of Contributor				Regist	ratio	n Num	ber, if PA	AC	
Nirmal Sinha									
Street Address		_	tion/Labor Organization*					Form (Cash, Ch	eck, etc.)
6470 Meadowbrook	PUC							Check	
City	Stat		Zip Code	M		D	Y	Amount	100.00
Worthington	0	Н	43085			2 1	0 5		100.00
Full Name of Contributor				Regist	tratic	on Num	ber, if PA	AC	
Suguneswaran S. Suguness				<u></u>					
Street Address			tion/Labor Organization*					Form (Cash, Ch	eck, etc.)
4876 Galway Dr.			ngineering					Check	
City	Stat		Zip Code	M		D	Y	Amount	400.00
Dublin	0	Н	43017				0   5		100.00
Full Name of Contributor				Regist	tratic	n Num	ber, if PA	AC	
		_						I= (a ) at	
Street Address	Employer/	Оссира	tion/Labor Organization*					Form (Cash, Ch	eck, etc.)
				T		_	T 7.	<del>                                     </del>	
City	Stat	e	Zip Code	M		D	Y	Amount	
					4			<u></u>	
Full Name of Contributor				Regist	tratic	n Num	ber, if P	AC	
	Ir1 /	·O	tion of all and one of the state of the stat	<u> </u>				Form (Cosh Cl.	ands ata
Street Address	Employer/	Occupa:	tion/Labor Organization*					Form (Cash, Ch	cck, cic.)
	ļ <u>.</u>		7: C. 1.	T > -	_	В	1 1/	A	
City	Stat	е	Zip Code	M		D I	Y	Amount	
	l							<u> </u>	

\* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must appear. [R.C. 3517.10(B)(4)]

Page Total \$ 700.00

3	1-	В			
R	C	351	7	10	)

Page 3
--------

# **Statement of Expenditures**

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Dorrian Committee								
To Whom Paid	•			М	D	Y	Amount	
St. Timothy Men's Club				$1 \mid 0$	1 8	0   5		32.00
Address	Purpose	_						
1088 Thomas Ln.	Fund							
City	State		Zip Code	Check N		,		
Columbus		H	43220	1,,	2187			
To Whom Paid  To all in Country Days a graph's Pourty Lead-	اما امند:	~L		$\begin{bmatrix} M \\ 1 \mid 0 \end{bmatrix}$	$\begin{vmatrix} D \\ 1 \end{vmatrix} 8$	$\begin{vmatrix} \mathbf{Y} \\ 0 \end{vmatrix} 5$	Amount	50.00
Franklin County Democratic Party Jud	Purpose	ct.		11 0	1 8	1013	<u> </u>	30.00
271 E State St.	Judica	al D	orts:					
2/1 E State St.	State		Zip Code	Check N	lumber			
Columbus	1	H	43215		2188			
To Whom Paid			10 110	М	D	Y	Amount	
Catholic Times				1   0	1   8	0   5		309.38
Address	Purpose							
197 E Gay St	Adve	rsti	ng					
City	State		Zip Code	Check N				
Columbus	0	$H_{\underline{}}$	43215		2189			
To Whom Paid				M	D	Y	Amount	40.45
Megan Kilgore	,			1 0	2 4	0 5		42.47
Address	Purpose	,	1.					
685 Kerr St.			supplies	Check N				
Columbus	State	Н	Zip Code 43215	Check IN	2190	ı		
Columbus To Whom Paid		11	40210	M	Z190	Y	Amount	
Buckeye Printing and Mailing Service				1 0	2 4			278.91
Address	Purpose			1 0	<u> </u>	1010		2,0.71
217 N. Grant St	-	ge a	and Envelopes					
City	State		Zip Code	Check N				
Columbus	0	H_	43215		2191			
To Whom Paid				М	D	Y	Amount	
J. W. Cleary Promotional Products	·		· · · · - · · - · · - · · · · · · · · ·	1 0	2 4	0 5	J	205.80
Address	Purpose	,	1					
1511 Northwest Blvd.	+		Adversting	[CL 1.33				
City	State		Zip Code 43212	Check N	1192 2192			
Columbus To Whom Paid		H	43212	М	2192 D	Y	Amount	
Treasurer State of Ohio				1 0	$\begin{vmatrix} 2 \\ 4 \end{vmatrix}$	I	Amount	140.00
Address	Purpose			1110	4 4	1015		140.00
77 S. High St	CPA	Rer	newal					
City	State		Zip Code	Check N	lumber			
Columbus	$\circ$	Н	43215		2193			
To Whom Paid				M	D	Y	Amount	
JYC Communications				$1 \mid 0$	2 5	0 5	<u> </u>	5,000.00
Address	Purpose							
6262 Stonwalk Ln.	Adve			la:				
City	State		Zip Code	Check N				
New Albany		H	43054		2194			

**31-B** R.C. 3517.10

Page _	4

# **Statement of Expenditures**

Prescribed by Secretary of State 2/01

Name of Committee in Full							
Citizens for Dorrian Committee				1 37	T 5	1 17	
To Whom Paid Postmaster				$\begin{bmatrix} M \\ 1 \end{bmatrix} 0$	D 2 8	O F	Amount 111.00
Address	Purpose Stamps 1   0   2   8   0   5   111.00						
City	State Zip Code			Check N	Tumber 2195	:	
To Whom Paid				M	D D	Y	Amount
Address	Purpose						
City	Sta	te	Zip Code	Check Number			
To Whom Paid	<u> </u>			M	D	Y	Amount
Address	Purpose			1		1	
City	Sta	te	Zip Code	Check Number			
To Whom Paid				M	D	Y	Amount
Address	Purpose				<u> </u>		***************************************
City	State Zip Code			Check Number			
To Whom Paid	J		<u> </u>	M	D	Y	Amount
Address	Purpose						
City	Sta	te	Zip Code	Check N	Number		
To Whom Paid				M	D	Y	Amount
Address	Purpose				<u> </u>		
City	Sta	te	Zip Code	Check N	Check Number		
To Whom Paid				M	D	Y	Amount
Address	Purpose						
City	Sta	te	Zip Code	Check Number			
To Whom Paid				M	D	Y	Amount
Address	Purpose	Purpose					
City	Sta	te	Zip Code	Check N	Number		
		_			_		

Page Total \$ 11	1.00
------------------	------